

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 10803602
APPLICANT(S)

FILING DATE 03-12-04

CLAIMS						
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	/					
2		1				
3		1				
4		1				
5		1				
6		1				
7		1				
8		1				
9		1				
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11		1				
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13		1				
14		1				
15		1				
16		1				
17		1				
18		2				
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42						
43	1					
44	1					
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50						
TOTAL IND.	9					
TOTAL DEP.	24					
TOTAL CLAIMS	33					

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